

NEWS & ARTICLES

Physicians Call for Improvements to Country's Public Health System to Protect U.S. Residents

The American College of Physicians (ACP) recently released a new policy paper, Strengthening the Public Health Infrastructure, at their annual scientific meeting in New Orleans. The paper highlights the concern that recent reductions in funding pose a risk to the country's ability to ensure the safety of food and drugs, protect the public from infectious disease risks, and prepare for natural disasters and bioterrorism. [MORE>>](#)



Animal Welfare Groups Help Include Pets in Disaster Recovery

By looking back on Hurricane Katrina and the tornado that struck Joplin, Missouri, lessons can be learned about disaster planning for animals. Partnering with organizations such as the American Society for the Prevention of Cruelty to Animals

(ASPCA) has been shown to be an effective practice. The ASPCA provides workshops to citizens and local governments, and has additional resources available on their website. [MORE>>](#)

Preparedness Goals Associated with the Nuclear Threat

On May 2, 2012, DomesticPreparedness.com hosted an Executive Briefing to discuss the Global Nuclear Detection Architecture's role in preventing radiological and nuclear attacks, and collaborating efforts between federal, state, and local governments to increase preparedness. The meeting was attended by various government, law enforcement, and hospital agencies, as well as other private and public officials. Please visit the above link for a full report of topics covered at the meeting. [MORE>>](#)

The Evolution of Law in Biopreparedness

The Evolution of Law in Biopreparedness, published by James Hodge in the Journal of Biosecurity and Bioterrorism: Biodefense Strategy, Practice, and Science, explores the evolution of legal reforms that facilitate bioterrorism preparedness and response. Hodge looks at advances in law as a tool for bioterrorism preparedness and response and the challenges that remain to be overcome in this area. [MORE>>](#)

FEMA LawTalk Podcast Series Now Available Online

The Federal Emergency Management Agency (FEMA) Legal Podcast series is now available online, and is designed to promote innovation in emergency management through a better understanding of the legal authorities that support FEMA's efforts to reduce loss of life and property and protect the nation from all hazards. Each podcast discusses a different legal topic that is relevant for members of the many audiences who are part of the FEMA community, including employees, stakeholders, students of emergency management and the public. A new podcast will

National Preparedness Report

The Federal Emergency Management Agency (FEMA) released a new report on how prepared the U.S. is as a whole. The National Preparedness Report is published yearly as a requirement of Presidential Policy Directive 8 (PPD-8). The report states the nation is becoming more prepared in areas of high priority. Health and Medical services was cited as one of the high priorities, which saw preparedness improvements. An area such as Health and Social Services was considered a low priority nationally with much less preparedness improvements made. The full report is available online. [MORE>>](#)

A fact sheet summarizing the report is by clicking [HERE](#).

Looking for ICS 300 and ICS 400 Training Courses?

For information about ICS 300 and ICS 400 courses being sponsored by Regional Healthcare Coalition Partners please visit MI-TRAIN and search for course ID: 10300775 (ICS 300) and 1018741 (ICS 400). There is no cost to participants for these courses as they are supported 100% by the Michigan Department of Community Health with funding from the U.S. Department of Health and Human Services, ASPR/HPP Preparedness Program. Click [HERE](#) to visit MI-TRAIN.

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be published on the internet every two weeks. Now available: Sources and Hierarchy of Federal Law. [MORE>>](#)

NNSA, FBI Conclude Radiological Security Exercise at NIEHS in North Carolina

The National Nuclear Security Administration (NNSA) and the Federal Bureau of Investigation (FBI) recently completed a table-top counterterrorism exercise at the National Institute of Environmental Health Sciences (NIEHS), in North Carolina. This exercise was the latest in a series of nationwide exercises aimed at giving first response teams and law enforcement hands-on experience in responding to a terrorist attack involving radioactive materials. State officials from the North Carolina Emergency Management, Public Health, Emergency Medical Services, and Highway Patrol were among the participants. [MORE>>](#)

Sustainable Practices Create Disaster Resiliency in Portland, OR

Portland, Oregon promotes resiliency by empowering the community to get involved. Cargo or freight bikes are becoming popular in Portland's sustainable community and their ability to haul gear and supplies works into disaster response. [MORE>>](#)

FBI Issues Travelers' Cyber Warning

Recently, there have been instances of travelers' laptops being infected with malicious software while using hotel Internet connections, the FBI warned via EmergencyEmail. In these instances, the traveler was attempting to set up the hotel room Internet connection and was presented with a pop-up window notifying the user to update a widely used software product. If the user clicked to accept and install the update, malicious software was installed on the laptop. [MORE>>](#)



The Risk From Chemical Plants

A New York Times opinion editorial discusses the ongoing vulnerability of hundreds of facilities that produce, store or use highly toxic chemicals that given a chemical disaster would put more than 100,000 people at risk. [MORE>>](#)

RESEARCH

To RCT or Not to RCT: Deciding When 'More Evidence is Needed' for Public Health Policy and Practice

Researchers in the British Medical Journal of Epidemiology and Community Health suggest a method of assessing whether or not to perform a randomized control trial for public health issues. They created a flow chart that helps the user form four main points of information to use in the decision making process for randomized control trials for public health. They say that the flow chart is similar to Value in Information approach with the added value of structure to decision making in regards to performing new public health research. The full article is available online. [MORE>>](#)

Pacific Islands Which Escaped the 1918–1919 Influenza Pandemic and Their Subsequent Mortality Experiences

In Epidemiology and Infection authors publish a short report on 1918 pandemic influenza in the Pacific islands. The authors found that some Pacific islands had high infection rates and low mortality whereas others had high mortality. They found that previous exposure to influenza as well as degree of island isolation was factors in 1918 pandemic influenza mortality. The full report is available online. [MORE>>](#)

Trials at the Ready: Preparing for the Next Pandemic

Ed Yong, a British science writer, published an article in the British Medical Journal outlining the issue of using the randomized control trials to study different aspects of a pandemic influenza virus during a pandemic. He argues that currently, there were missed opportunities for performing randomized control trials because they take so long to plan and acquire funding. He cites the International Severe Acute Respiratory Infection Consortium (ISARIC) is one group that plans to change this. The ISARIC is looking to have randomized control trials preplanned ahead of a pandemic and when the next one hits, the funding is released and research can begin. The ISARIC is also using the planning process to help create relationships between members of the scientific community so that during the chaos of a pandemic, there are people ready to act. The original article is available online. [MORE>>](#)

Celebrating a Public Health Rock Star

He eradicated smallpox and now, public health champion, William Foege, MD, MPH will be honored alongside Bob Dylan, Madeleine Albright, John Glenn, and nine others with the Presidential Medal of Freedom. Foege served as the director of CDC from 1977-1983 among many other public health positions; most recently with the Bill and Melinda Gates Foundation. The White House's announcement says, "Foege's leadership has contributed significantly to increased awareness and action on global health issues, and his enthusiasm, energy, and effectiveness in these endeavors have inspired a generation of leaders in public health."



National Emergency Alert System Goes Live

The Commercial Mobile Alert System went live earlier this month. This national alert system allows the public to receive emergency alert notifications on their mobile phones without having to sign up or pay for the service. This system is the product of a partnership between the Federal Emergency Management Agency, (FEMA), the Federal Communications Commission (FCC), and phone carriers. [MORE>>](#)

More Health Departments Nationwide Embracing Social Media: Use of Tools Rises

More health departments are utilizing social media tools for a multitude of functions, including preparedness and response activities. For example, the Philadelphia Department of Health launched a successful Facebook page during the 2009 H1N1 pandemic. Valuable lessons were learned about gathering feedback through this channel. [MORE>>](#)

Practicing What We Preach: Answering the Call for Responder Self-Care and Resilience

Disaster responders are trained to provide care to survivors of disasters and traumatic situations, but all too often they do not pay attention to their own signs of stress. This article makes the case for responder self-care, describes why disaster responders are particularly at risk, and suggests several practical strategies for disaster responders to take care of themselves and boost their resilience. [MORE>>](#)

THE MICHIGAN UPDATE

Region 1 Update

District 1 Regional Medical Response Coalition (D1RMRC) Update

- The D1RMRC recently deployed two Mobile Medical CBRNE Support Units (MMCSU). One unit was used to support the Lansing Marathon, providing access to medical supplies and the patient tracking system. A second unit was utilized to support Herrick Hospital during repairs to the hospital's oxygen delivery system. This makes a total of five deployments of these regional units over the past year.

- The upcoming CHEMDOT 12 training exercise will bring all six regional units to Michigan State University Pavilion. The full day of activities will include training on the mobile radiation detection system. In addition, the 51st Civil Support Team will participate in the all-day event and provide training.
- The DIREPLAY Exercise series is in full swing. There were five hospital exercises conducted in the past month, and four more are scheduled over the next several weeks. The focus is directed at evacuation and shelter-in-place (DIREPLAY3) relating to "active shooter" scenarios along with the medical surge planning (DIREPLAY 4) that was focused on activating and setting up Alternate Care Sites. Although the D1RM-RC has conducted many medical surge exercises over the years, this season brought new partners from Olivet College and old partners from Spring Arbor University to the events. The region is committed to exercising local and regional plans and refining the activation and operation process for the Modular Emergency Medical Systems (MEMS). Many thanks go out to Sparrow Clinton, Hayes Green Beach, Eaton Rapids Medical Center, McLaren Lansing, and Allegiance hospitals for making the commitment to this program. The DIREPLAY 5.2 mass fatality exercise will be conducted May 31, 2012 and will test the regional behavioral health response protocol.
- The D1RMRC Education and Training Workgroup hosted the Texas Engineering Extension (TEEX) Disaster Preparedness for Hospital and Healthcare within the Community Infrastructure. This training incorporated many different disciplines over the 2-day course.
- Continually active in the National Disaster Life Support program, the Region hosted a Basic Disaster Life Support (BDLS) training for the region's new instructors. This was the first BDLS class in the state that used the new texts and materials.
- D1RMRC will be holding an ICS 300 class at the D1RMRC training center on May21-22, 2012 and ICS 400 in June.
- D1RMRC also continued its strong partnership with the MSU School of Nursing providing Mass Casualty Incidents training and CBRNE awareness training followed by a brief interactive exercise. Over 70 graduating nursing students participated in the afternoon sessions.

Region 5 Update:

Region 5 Exercises Field Hospital Resources for Four Days in Cold Weather

Well, kind of cold. . . Planning for field exercises can be a challenge to begin with, but when the weather defies the plan, opportunities to evaluate other components of deployment and operation must be taken. Thankfully, flexibility and energy are significant characteristics of those that deploy Region 5's resources and despite the weather (and an early thaw causing nearly a foot of mud on the grounds) much was learned from the exercise.

Region 5 houses approximately one third of the State of Michigan's Transportable Emergency Surge Assistance Medical Unit (MI-TESA). TESA is a 140-bed mobile field hospital that would provide medical assistance to patients in need of primary care following a large scale disaster. It would serve patients that are expected to be released within 23 hours of admission. TESA capabilities include X-Ray screening, suturing, airway care and other essential immediate services that might be necessary following a disastrous event. A temporary hospital facility, similar to Michigan's TESA resource, was set up and maintained for a much longer period of time in Joplin, Missouri, shortly after St. John's Hospital was destroyed by an F5 tornado in May of 2011. That facility supplemented medical services to the community to provide some relief to the over-taxed medical resources within the region. Planning to perform the partial set-up of this asset began at the beginning

of the ASPR grant year (late July) and continued into the new calendar year. Biweekly meetings were held during the last month of planning. Little did the planners know that southwest Michigan would experience the mildest winter on record for the cold weather exercise. The goals of the exercise were to establish realistic timeframes for deployment and set-up; identify logistical issues related to terrain and cold temperatures; and identify challenges that would need accommodation during a deployment in a less-than-optimal climate.

Activation of the resource and travel to the designated site went as planned, with initial deployment occurring well within the two hour window established. Tents and other materials are stored for rapid deployment at a moment's notice within transport vehicles so that trailers merely need to be connected to tow vehicles to activate the transportation chain. An ongoing formal contract with a private carrier provides resources for immediate deployment of TESA and related equipment.

A likely site was pre-arranged for the set-up. Van Buren County graciously offered their fair grounds as a secure venue for the exercise. Van Buren County Emergency Management staff served as points of contact for the 4-day exercise and were an invaluable resource for supplies and equipment necessary to address challenges that occurred. Food services were provided by the Greater Kalamazoo Area Chapter of the American Red Cross, with approximately 50 meals provided for both breakfast and lunch each day. Private vendors provided sanitary services and diesel fuel necessary to run generators and heaters for the tents. Kalamazoo County Emergency Management provided an all-terrain vehicle, which proved invaluable for the size of the site and for the transportation of staff from parking areas away from the main set-up area. (It was necessary to develop alternative parking arrangements during the exercise due to ground thawing and extremely muddy conditions.) Labor for the set-up of this resource comes from Regional Medical Assistance Teams comprised mostly of local paramedics and tactical medics. These teams of approximately 10 are ideally established to assist with initial set-up and medical assistance on site for TESA deployments in Region 5. For this exercise, Region 2South was invited to send staff to assist in the set-up of the tents in an effort to share some of the lessons learned from the weather-related exercise.

Set up of the tents went as planned. Light snow fell as the tents were being constructed and due to heavy clothing and cold hands, as expected, set up was prolonged, not only due to the cold conditions, but to the infrequency with which the tents are set up. After the first tent was set, subsequent tents went up smoothly. Day one was devoted entirely to the set up of three TESA tents (Region 5 has a total of six tents). The tents were set up on a road bed, which, despite a slight curve in the road, proved to be a good choice. The tent foundations remained mostly dry during the subsequent thaw that occurred on days two – four.

Day two provided an opportunity to test personnel badging procedures, set up simulation equipment and to provide training for regional medical personnel. The simulation equipment, much like real patients, requires a temperature controlled environment, which was maintained by diesel heaters that supplied heat to each tent. Adult, pediatric and infant simulation scenarios offered a wide range of patient types for simulated care in an austere environment. Carbon Monoxide monitoring equipment was tested for both accuracy and placement within the tents. The placement of sanitation supplies, auxiliary lighting and personal protective equipment was established and evaluated. Observers from local governments, OPHP staff, human services agencies staff members and medical providers toured the facility and many photographs were taken.

Throughout the week, E-Team and video-conferencing capabilities with local Emergency Operations Centers were tested. By Day four, all Region 5 staff

were wet, muddy, tired of taking off and putting on outer clothing to adjust to temperature changes and ready to pack up the tents for a subsequent week-long activity of recovery--de-mudding and cleaning. The final consensus was a unanimous appreciation for real time, real world exercising of resources, as it will ultimately improve local and statewide response during a real time event.

Region 8 Update:

Alger County Winter Storm Tabletop: Interagency Coordination and Collaboration

On your way to work you turn on the radio in your car and hear: *Beep, Beep, Beep*; "The National Weather service has issued a severe ice and snow storm warning for Alger County starting 9am February 9th and expected to last 4-5 days. Expect roads to be impassable and long durations of power outages. Stay tuned for any changes" *Beep, Beep, Beep*.

In early December 2011, a storm forced power outage in the City of Munising along with other outlying communities throughout the county lasting approximately 5-8hrs. Due to a malfunctioning generator, a local skilled nursing facility was forced to transfer numerous patients to Munising Memorial Hospital to provide the medical support needed to properly care for them. As a result the question was asked: What if this storm lasted longer? What if the power was out longer than 8 hours, maybe lasting days?

Now that we had the question, we set out on a planning process to help answer it. After several months and numerous meetings, key players and a scenario were identified; February 9, 2012 was set for the tabletop exercise. Local Emergency Planning Committee members, Emergency Operations Team, and elected officials met to tackle the problem. Twenty-five plus members of various disciplines were organized in categories as they arrived into the EOC. Each of these members received a packet that contained a quick personal readiness survey, along with information regarding the scenario. Included was a narrative to also include identification of their resources as the scenario progressed, helping to assist in identifying priorities as the events unfolded.

The Exercise: At roughly 8:45 am on February 9th, a storm began. The 911 Dispatch Center was quickly overrun with calls, including MVA's and trees on power lines. It quickly became apparent that the EOC needed to be activated. Not long afterwards, power was lost within the city limits and other outlying areas of the county. The locations of all available generators within the county were identified, gathered, and set up for heat and lightings. It was quickly established that our medical first responder agencies would have to remain within their areas to assess, triage, treat, and help set up temporary shelters within their jurisdiction as the roads get worse.

The Hot Wash: Many positive assets were identified. One in particular was the Alger Maximum Correctional Facility, located a few miles from the hospital. The Warden and Deputy Warden were in attendance and brought many useful resources to the table, including fuel, extra generators, use of their gym as a temporary shelter, along with additional staff, including those who were medically trained.

As with any exercise, problems and shortfalls were identified, starting with communications. As decisions were being made in the EOC, but calls being received at the 911 Dispatch Center, there was little or no communication between the two. We learned that one nursing facility

and one assisted living facility had limited use of a generator along with limited stocks of food and water supplies for their patients, necessitating transfer and relocation. One local skilled nursing center was able to offer more assistance to the other facilities in need. We also learned our local hospital still has a few shortfalls with generator issues, along with food and water since it relies on the city water supply. All of these are being addressed.

Every member of each group was given a packet when they arrived. This packet contained an important survey to evaluate the level of readiness for members of the LEPC, the EOC, operations, and our elected officials on a personal level to include their families who were supplied "Go Bags." All in all, we found not many would be able to respond quickly with ample amount of medications and supplies to sustain a long operation of many days. It was to identify their readiness and to be aware of how prepared they were to perform their respective response roles in an actual emergency. The exercise was concluded with a conference call with Senator Casperson to discuss the exercise and the point that a Declaration of State of Emergency would be needed.

The exercise tested the readiness of our providers, our team members and tested the limits within our own capabilities. It helped define a list of equipment and training that was needed including PIO officer training, updating contact concepts and information for resources such as the Red Cross and CERT team. This exercise showed the benefits of pre-planning and identified the many true resources we have in this small community. It also identified the vast rural nature of our county and as a result, how each township may need to step up and take care of their own residents with hindered travel and extreme weather conditions. The participation of players who turned out for this exercise was impressive. Choosing a scenario that could easily happen only brought this incident and exercise more to life.

TOOLS & RESOURCES

At-Risk Populations eTool

An electronic toolkit is now available for public health planners conducting community outreach efforts regarding special, vulnerable and at-risk populations. The eTool is a companion guide to the Public Health Workbook to Define, Locate, and Reach Special, Vulnerable, and At-risk Populations in an Emergency earlier released by the Centers for Disease Control and Prevention (CDC). The electronic toolkit provides planners with:

- Information on how to define, locate and reach community residents who may have special information needs.
- A step-by-step guide on how to build a community outreach information network able to provide insight about hard-to-reach populations and assistance to public health planners and responders before and during a crisis.
- A collection of customizable and fillable forms to capture the results of planning based on the original workbook.

The new electronic toolkit is free and available on the Internet. Click [HERE](#). The original workbook is free and can be downloaded, click [HERE](#).

National Alliance for Radiation Readiness Launches Clearinghouse

The National Alliance for Radiation Readiness (NARR) is a coalition of sixteen public health, medical and emergency management organizations joining together to be the collective "voice of health" in radiological preparedness. The NARR serves as a source of national radiological subject matter expertise and has recently launched an online clearinghouse for the sharing of resources,

tools, and best practices related to radiation planning, response, recovery. [MORE>>](#)

CDC's Guide to Writing for Social Media

This guide was written to provide guidance and share the lessons learned in more than three years of creating social media messages in CDC health communication campaigns, activities, and emergency response efforts. This guide provides information on how to write more effectively using multiple social media channels; particularly Facebook, Twitter, and mobile phone text messaging. The guide is intended for a beginner audience, although some readers with an intermediate level may find it useful too.

Some of the topics covered:

- How social media should be part of your overall health communication efforts
- How to incorporate the principles of health literacy in your messages
- Separate chapters on writing for Facebook, Twitter, and text messaging

The Guide is available online, click [HERE](#).

TRAINING & EVENTS

Railroad Training (online) for First Responders

CSX recently launched a free, online training program to educate emergency personnel on how to safely respond to incidents on and around railroad property and equipment. The site is the first of its kind launched by a U.S. railroad for this audience. CSXSAFE offers participants the opportunity to gain an understanding of how railroads operate, including some of the hazards of working around the rails and necessary protocols to keep responders safe. This web-based program takes less than an hour to complete, and is intended to provide important information to public agency personnel in fire and police departments, rescue and emergency medical organizations. Click [HERE](#).

Online Training: Emergency Use Authorization

The Food and Drug Administration and Centers for Disease Control and Prevention developed an online course, Emergency Use Authorization. The course is aimed at public health professionals and clinicians. Click [HERE](#).

Webinar: Using the Guidelines for Foodborne Disease Outbreak and Response Toolkit

May 21, 2012

1:00-2:15 PM

This webinar is for any public health official. The webinar will review outbreak investigation methods and show participants how to use the Council to Improve Foodborne Outbreak Response Toolkit. Participants will also learn about two states' experiences implementing the Toolkit in order to improve their response to multijurisdictional outbreaks. To learn more, click [HERE](#).

Webinar: Community Management of Geriatric Patients during Disasters

May 30, 2012

1 p.m. to 2:30 p.m.

Description: Program faculty will demonstrate a need to break from the way in which communities have prepared and reacted to the management of geriatric patients during disasters in the past in order to achieve survival and success in the future. For more information and to register, click [HERE](#).

Webinar: Meeting the Needs of At-risk/vulnerable Populations in Rural Settings

May 31, 2012

3:00 p.m. – 4:00 p.m.

The Association of State and Territorial Health Officials (ASTHO), with support from the Centers for Disease Control and Prevention, is hosting a learning event for state health agency staff who are interested in unique approaches for reaching at-risk/vulnerable populations in rural settings. The purpose of this learning event is to share examples from a local faith-based organization which seeks to provide seasonal influenza vaccinations and the Vote and Vax program which promotes seasonal influenza vaccinations in conjunction with election days. For more information and to register, click [HERE](#).

Radiological Awareness & Response Workshop

May 30-31, New Brunswick, New Jersey

June 20-21, Cleveland, Ohio

The Federal Bureau of Investigation (FBI) is hosting workshops to promote coordination between local law enforcement, public health, and the private sector during a radiological incident. Attendees will participate in interactive exercises and mock epidemiological investigations. For more information and registration details, click [HERE](#).

Medical Preparedness and Response to Bombing Incidents Course

June 26-27, 2012

Region 2 South Healthcare Coalition will be presenting a nationally recognized course conducted by TEEC (National Emergency Response and Rescue Training Center) and New Mexico Tech (Energetic Materials Research and Testing Center) on medical preparedness and response to bombing incidents. This course is funded with a grant from the Department of Homeland Security and is offered free of charge to participants. The course is limited to 50 participants and is expected to fill up quickly. Registration information is available on the Region 2 South SharePoint website at <http://portal.2south.org>. NOTE: If you already have a R2S SharePoint user name and password, please use it when registering. ALL others please follow the directions provided below:

Account name: 2south@2south.org

Password: 2south

- Type the website into your browser's address window.
- Click on Sign In at the very upper right of the screen.
- Click on the Training Tab located just below the 2South icon on the upper left side of the screen.
- Select Medical Preparedness – Jun 2012 in the shaded area on the left hand side of the screen.
- Click on Add document to open a blank registration form.
- Fill out the registration form.
- When completed, click on the Submit button located at the bottom of the form.

International Critical Incident Stress Foundation (ICISF) Courses

June 28- 30, 2012,

8:00 AM to 5:00 PM

Prudenville, MI

This 3-day training combines the content of two ICISF courses: Individual Crisis Intervention and Peer Support and Group Crisis Intervention. This training will outline the fundamentals of Critical Incident Stress Management (CISM) and prepare participants to understand a wide range of crisis intervention services, such as, demobilizations, defusing's, debriefings, and follow-up refer-

als. Cost for 3 day training is \$250.00. Continuing education credits offered. To register contact: Susan Elben at Northwind Consultants, LLC. Ph: 269-720-6852, or email brusue221@aol.com.

Crisis and Emergency Risk Communication (CERC) Train-the-Trainer Course

August 14-16, 2012

Atlanta, GA

The Centers for Disease Control and Prevention (CDC) is offering a 2½ day CERC Train-the-Trainer course at CDC Headquarters in Atlanta, Georgia. CERC is an approach used by scientists and public health professionals to provide information during natural or manmade disasters when an individual or an entire community has to make health-related decisions under time constraints. Taught by Dr. Barbara Reynolds, the course is designed to train those who will serve as instructors so that they will be able to conduct future CERC trainings. The target audiences include: federal, state, and local public health professionals, healthcare professionals, emergency medical services professionals, preparedness partners, and civic and community leaders. There is no cost for this training; however travel and lodging are the responsibility of the participant. Scholarships are not available. For more information and to register, click [HERE](#)



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